Best Available Copy

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

PM 273221

CLAIMS AS FILED - PART					Ι	•		SMALL E	NTITY		OTHER	THAN	
T-0-11 01 11110			(Column 1)		(Colu	(Column 2)		TYPE				L ENTITY.	
TOTAL CLAIMS		A7					RATE	FEE		RATE	FEE		
FOR			NUMBER	FILED	NUME	BER EXTRA	·	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		A7 minus 20= *		*	. 27		X\$ 9=		OR	X\$18=	486.01		
INDEPENDENT CLAIMS			5 minus 3 = *		*	. 2		X40=		OR	X80=	160.00	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL		OR		1356.co	
CLAIMS AS AMENDED - PART										10.,	OTHER		
(Column 1)			(Column 2)			(Column 3)	_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus ;	** .		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	*** DENDENT	CLAIM	=		, X40=,		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							۱. [	+135=		OR	+270=		
ing Albanian in the control of the California of the control of th								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	;	
3.3	· · · · · · · · · · · · · · · · · · ·	•	10011.1 CC			ADDII. I C.E.							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	NETTION OF ME	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				CLAIM		 	+135=			+270=		
							L	+135≡ TOTAL		OR	+270= TOTAL		
							Α	DDIT. FEE		OR ,	ADDIT. FEE		
		(Column 1) CLAIMS	Section 19 SA	(Colun		(Column 3)				_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	ï	
	Independent	*	Minus	***	<del></del>	=		X40=		OR	X80=	· · · · · · · · · · · · · · · · · · ·	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┠						
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT: FEE		
•	The "Highest Num	ber Previously Paid	For" (Total or	Independe	ent) is the	highest numbe	r four	nd in the app	ropriate box	in colu	umn 1.		